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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/595,431	01/03/2007	Gerhard Tivig	PHDE030358US	9506
38107	7590	10/28/2009	EXAMINER	
PHILIPS INTELLECTUAL PROPERTY & STANDARDS			BITAR, NANCY	
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No.	Applicant(s)
	10/595,431	TIVIG ET AL.
	Examiner	Art Unit
	NANCY BITAR	2624

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) Responsive to communication(s) filed on 29 June 2009.

2a) This action is **FINAL**. 2b) This action is non-final.

3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) Claim(s) 2-6,12,14-22 and 24-28 is/are pending in the application.

4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5) Claim(s) _____ is/are allowed.

6) Claim(s) 2-6,12,14-22 and 24-28 is/are rejected.

7) Claim(s) _____ is/are objected to.

8) Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) The specification is objected to by the Examiner.

10) The drawing(s) filed on 19 April 2006 is/are: a) accepted or b) objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

a) All b) Some * c) None of:

1. Certified copies of the priority documents have been received.
2. Certified copies of the priority documents have been received in Application No. _____.
3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892)	4) <input type="checkbox"/> Interview Summary (PTO-413) Paper No(s)/Mail Date. _____.
2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948)	5) <input type="checkbox"/> Notice of Informal Patent Application
3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date _____.	6) <input type="checkbox"/> Other: _____.

DETAILED ACTION

1. Applicant's response to the last Office Action, filed 03/30/2009, has been entered and made of record.
2. Applicant has amended claims 5, 12, 15, 22, 24. Claims 27-28 have been added. Claims 2-6, 12, 14-22, and 24-28 are currently pending.
3. Applicant's remarks filed 6/29/2009 in views of the newly presented claim amendments have been considered. However, the amendments have altered the scope of the claimed invention and necessitate new grounds of rejection. That rejection is presented below and is accordingly made FINAL

Claim Rejections - 35 USC § 112

The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

4. Claim 5 is rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention. Claim 5 is unclear and confusing what applicant meant “ automatically converts in real time the received measurement data into data for a histogram INCLUDING A UPDATED REAL TIME” .It is believed that applicant is trying to claim that the histogram includes updates real time measurement data . Appropriate correction is required

Claim Rejections - 35 USC § 103

5. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:
 - (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.
6. Claims 2-6, 12, 14-22, 24-28 are rejected under 35 U.S.C. 103(a) as being unpatentable over Seely et al (US 2003/0117296) in view of Balakirev et al (WO 9318706).

As to claim 5, Seely et al teaches the method of automatically displaying medical measurement data in which a computer: receives the medical measurement data (107, figure 1) automatically converts in real time the received measurement data into data for a histogram including a updated in real time, (paragraph [0075], [0085]), during the conversion, generates a cumulative curve indication of the medical measurement data the cumulative curve being cumulative of the series of histogram values (figure 5, and 6) and outputs the cumulative curve combined with the histogram as picture signals (paragraph [0088-0089]).

While Seely et al meets a number of the limitations of the claimed invention, as pointed out more fully above, Seely teaches the variability display (paragraph [0085-0090] but fails to specifically teach the histogram includes an updates in real time values and generating a cumulative curve indicative of the medical measurement data the cumulative curve being cumulative of the series of histogram values.

Specifically, Balakirev et al. teaches the ECG signal is converted to a digital signal which then processed by a microprocessor and displayed in real time on a LCD. The duration of The R-R intervals is measured with assigned precision which corresponds to the characteristics scale of the heart beat rhythm variations in the phase wherein the result is displayed in real time in the form as rhythmograms and histograms which both correspond to the characteristic scale (see abstract and figure 3.1;3.2) . It would have been obvious to one of ordinary skill in the art to generate in real-time the histogram data and the cumulative curve in Seely display in order to facilitate the indication and the precise evaluation of the medical measurement data with less user intervention. Therefore, the claimed invention would have been obvious to one of ordinary skill in the art at the time of the invention by applicant.

As to claim 2, Seely et al teaches a method as claimed in claim 5, further including dynamically updating in real-time the histogram and the cumulative curve (These values can be displayed as pairs of dynamic variability parameter histograms 526, 546, figure 5).

As to claim 3, Seely et al teaches a method as claimed in claim 5, further including: filing the histogram is filled with measurement data from a time window advancing in real time with selectable fixed length (see figure 6, note that for each patient parameter v.sub.k, a user, typically an attending physician, may select the number of data points m.sub.k to collect in order to perform the variability analysis).

As to claim 4, Seely et al teaches a method as claimed in claim 2, wherein, during the conversion, the computer generates aids for the retrospective analysis of histograms in the form of selectable functions that can be displayed on a viewing screen and outputs them together with

the converted data combined as picture signals (note that the process 110 may be selected by a user from among a plurality of variability analysis options using a user interface 117, see paragraph [0061]).

As to claim 6, Seely et al teaches a method as claimed in claim 1, wherein the computer processes control signals that are produced by input means communicating with the computer and that serve to control the conversion and/or the output of the picture signals ,(The known individual patient interface and display 106a communicates measured values of the patient parameters to an apparatus in accordance with the invention that includes a processor 107 that performs individual patient data collection 108, paragraph [0061]).

The limitation of claim 12 has been addressed in figure 5 of Seely, 502, figures 5 and 6.

Seely teaches the limitation of claim 14 wherein the retrospective analysis aids include a deviation readout (The simplest method for computing variability parameters involves the calculation of mean and standard deviation of the frequency distribution of a selected data set. This information can be updated continuously and displayed visually as a graph. Statistical interpretation of the frequency distribution is dependent upon whether the distribution is normal or lognormal. There are standardized means of evaluating whether a distribution is accurately represented by a normal or log-normal curve, which include evaluation of kurtosis and skew. By calculating the kurtosis and skew, the user may be directed towards choosing an appropriate distribution. By evaluating the frequency distribution, the mean and standard deviation would represent the variability parameters for the particular patient parameter under evaluation, paragraph [0083])

Seely teaches the limitation of claim 15 in paragraph [0108]. Note that Balakirev teaches the generation of the cumulative curve in real time as the medical data is received (see abstract)

As to claim 16, Seely et al teaches the medical monitoring device as claimed in claim 15 further comprising an alarm indicator that is triggered measurement of histogram data is measured above or below a lower or upper alarm limits, (Alarms can be set so that if a variability histogram is within the normal range, it is displayed in one color (green, for example). If the value of the histogram rises above or falls below the normal range, it is displayed in a different color (red, for example), paragraph [0089]).

As to claim 17, Seely et al teaches the medical monitoring device as claimed in claim 13, wherein the histogram data is binned into histogram bins, the histogram bin size being definable by the user (The data is plotted in frequency bins, where each bin represents a proportional amount of variation, as measured by the squared difference from the mean, paragraph [0085]).

As to claim 18, Seely et al teaches the medical monitoring device as claimed in claim 13 further comprising display means for displaying real-time signal patterns of the medical measurement data (real-time display, 502, figure 5).

As to claim 19, Seely et al teaches the medical monitoring device as claimed in claim 18, wherein the real-time signal patterns and the histogram data are displayed next to one another on the display means (figure 5, 6; note that the variability analysis may be displayed on a multiple patient display at a central ICU console, as well as individual patient displays, paragraph [0108])

The limitation of claim 20-21, 24 and 26 has been addressed above. Seely teaches the beneficial to distinguish between organ systems, because therapeutic intervention is commonly directed towards individual organs. Examples of organ systems include the cardiovascular system, respiratory system, the hematological system, central nervous system, liver and metabolic system, kidney and waste excretion system in order to provide flexibility in the display of variability of multiple parameters. The user may select various display options to profile an organ system or a combination of interdependent organ systems (paragraph [0091-0093]). Moreover, Seely teaches retrospective analysis aids include a percentage of time that histogram values are within limits defined by the range-selection cursors; a variability/stability readout that provides information about variability of the measurement data ("Normal" ranges for the variability of each patient.

The limitation of claim 22, 24, and 25 has been addressed in claim 5

The limitation of claim 26-28 is addressed in Seely figure 5 and 6.

Conclusion

7. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period

will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to NANCY BITAR whose telephone number is (571)270-1041. The examiner can normally be reached on Mon-Fri (7:30a.m. to 5:00pm).

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Vikkram Bali can be reached on 571-272-7415. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Nancy Bitar/
Examiner, Art Unit 2624

/Wes Tucker/
Primary Examiner, Art Unit 2624